STATE OF WYOMING)		IN THE CIRCUIT COURT
COUNTY OF) ss)		JUDICIAL DISTRICT
Plaintiff: <u></u> Person or Entity Asserting a R	ight to the Pro	,) perty)	Case Number
VS.	-)	
Defendant:)	
Person or Entity Occupying t	he Property)	

OPTIONAL ANSWER TO COMPLAINT FOR FORCIBLE ENTRY AND DETAINER (EVICTION)

I am the Defendant ______, and I state the following as my answers and responses to the Plaintiff's Complaint for Forcible Entry and Detainer.

1. I deny that the Plaintiff should have possession of the property at issue in this case, and I assert that I should be allowed to remain on the property.

<u>OR</u>

 \Box I admit that the Plaintiff is entitled to possession of the property at issue in this case.

2. I deny that I owe the Plaintiff the amount of money alleged in the Complaint for Forcible Entry and Detainer.

<u>OR</u>

- ☐ I admit that I owe the Plaintiff the amount of money alleged in the Complaint for Forcible Entry and Detainer.
- 3. I deny that I was properly served with a Notice to Quit at least three days before the Plaintiff filed the Complaint for Forcible Entry and Detainer.

<u>OR</u>

- ☐ I admit that I was properly served with a Notice to Quit at least three days before the Plaintiff filed the Complaint for Forcible Entry and Detainer.
- 4. Any allegation that I have not specifically admitted is hereby denied.

WHEREFORE, I respectfully request that the Court find generally in my favor and against the Plaintiff, that the Plaintiff take nothing by way of the Complaint for Forcible Entry and Detainer, and that the Court grant such other relief as it deems just and proper.

Dated: _____, 20__.

Signature:	
Phone Number:	
Mailing Address:	
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Email Address:

□ A Wyoming Judicial Branch Court Navigator helped with this form.

Case	Number
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CERTIFICATE OF SERVICE

I certify that the original of this document was	filed with the Clerk of Circuit Court
in	County, Wyoming.
I further certify that on	, 20, a true and accurate copy of this
document was served on the other party in the following	ng manner:
\Box Delivered by hand to: (na	me)
\Box Faxed to this number:	
□ Mailed by United States Postal Service, postag	e pre-paid, to:
Name of other party or other party's attorney:	
Address of other party or other party's attorney:	
Signature:	
Printed Name:	
Date:, 2	0